



<b>Effective on 12/08/2004.</b> <b>Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEES TRANSMITTAL</b>		Application Number	10/035688-Conf. #3399
<b>For FY 2005</b>		Filing Date	November 8, 2001
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Laurie H. GLIMCHER
		Examiner Name	M. C. Wilson
		Art Unit	1632
<b>TOTAL AMOUNT OF PAYMENT</b>		( <b>\$</b> ) 760.00	Attorney Docket No.
			HUI-037CN

<b>METHOD OF PAYMENT</b> (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account   Deposit Account Number: <u>12-0080</u> Deposit Account Name: <u>Lahive &amp; Cockfield, LLP</u>							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee				
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments				
<b>FEES CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	
	Utility	300	150	500	250	200	100
	Design	200	100	100	50	130	65
	Plant	200	100	300	150	160	80
	Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
<b>Fee Description</b>							
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent							
50      25							
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent							
200      100							
Multiple dependent claims							
360      180							
<b>Total Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> <b>Multiple Dependent Claims</b> <u>22</u> - 46 = _____ x _____ = _____							
<b>Indep. Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> <u>6</u> - 6 = _____ x _____ = _____							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b> <b>Extra Sheets</b> <b>Number of each additional 50 or fraction thereof</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> <u> </u> - 100 = _____ /50 _____ (round up to a whole number) x _____ = _____							
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other: 2253 Extension for response within third month							
510.00							
2401 Notice of appeal							
250.00							
<b>SUBMITTED BY</b>							
Signature	<u>Megan E. Williams</u>		Registration No. (Attorney/Agent)	43,270	Telephone (617) 227-7400		
Name (Print/Type)	Megan E. Williams		Date	December 20, 2004			

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 981 584 794 US, in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 20, 2004

Signature: Megan E. Williams (Megan E. Williams)